

House of Commons



PRESIDENTIAL ADDRESS.

BY

R. MACNEILL, M.D., Stanley Bridge, P.E.I.

*Delivered before the Maritime Medical Association, Charlottetown, July
12th, 1899.*

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HIGHER MEDICAL EDUCATION.

GENTLEMEN :

When, one year ago, in the historic city of Halifax, you placed me in the honourable position of President, I felt that after the eminent addresses which my predecessors in this chair had delivered there was nothing left for me to say. The choice of a subject is a matter of no little difficulty. Medical education, however, is one in which the profession of Canada is greatly interested, and this Association representing the Maritime Provinces of Canada, may consider the time opportune to review it, not only as it may interest the profession but the people in general. The profession for a long time felt our anomalous position in being hemmed in by provincial boundaries so that a doctor who was legalized in one province could not follow his profession in another without passing a rigid examination. To-day we witness the realization of reciprocity in the practice of medicine in these provinces and what has been accomplished here can be accomplished in all Canada. I need not refer to the oft discussed enactment, "The British North America Act" by which Canada was federated, leaving the question of education with each province. That matter is generally well understood. Medical education since the early days of the fathers of our profession has undergone many changes and no one will dispute the fact that the science of medicine has advanced notwithstanding the mighty opposition it has met with in its various epochs. It is somewhat unfortunate that when our profession will take a step in advance, many of the people view our actions with suspicion and particularly when we apply for

legislative enactments. No other profession is looked upon by the people in the same way. Account for it as you will, the public look upon us when trying to raise the standard of education with suspicion and distrust that it is a scheme to raise our fees. A little reflection would convince them that it is truly in their own interests and to protect their lives, and that mercenary motives are secondary with us while primary with the people themselves. Is it unreasonable that we should insist on a high standard of medical education? I think not. The Church precepts and text of the sacred volume require such a standard of education and a curriculum of seven or eight years including an arts course, and the people appear quite satisfied that it should be so. The disciples of Blackstone also require a high standard of education. The candidates must pass a preliminary examination and a course of five years. If the precepts and text of the sacred volume require such a standard of education, if the statutes of parliament and the common law require an equally high standard to interpret, what can be said against us requiring of our followers that they be educated men, when they have to deal with a constitution that is fearfully and wonderfully made? Instead of repulsive epithets we should be hailed by the people as benefactors.

There is no pursuit that calls for a larger display of the best qualities of human nature than the practice of medicine, and one of the most essential elements among medical men is a reputation for high qualifications and accurate knowledge of their profession. The great Dr. Pepper, when Provost of the University of Pennsylvania said "the vast improvements that have taken place in medical science, the additions to the positive knowledge of disease and of the means for its prevention and cure, the widespread interest among the community concerning all physical science, the prevailing sense of the supreme importance of private and public hygiene, the constantly increasing wear and tear of our complicated social life—all of these foretell the large part which our profession must play in the future and at the same time attest its power."

This covers the whole ground and is sufficient to vindicate our course. In order to convince the people and the profession that we are not travelling too fast, nor asking unreasonable things in our efforts to elevate the standard of medical education in Canada, let us briefly look at the state of medical education in other countries. Instead of being considered aggressive, it will be seen that we are but humble followers in this movement. Superstition and mystery are fast fading away and the feeling with which science and medical men are regarded has undergone an equal change in all countries.

THE GERMAN EMPIRE.—(Population forty-one millions.)—There are twenty-three universities which confer the doctorate. To matriculate,

the applicant must either present a certificate of a gymnasium or pass a preliminary examination upon Latin, Greek, German, history, mathematics and the elements of natural science. The course extends over four years of nine and a half months in each year. The right to practise, however, can only be obtained by passing the State examination which is conducted by a board composed of the professors of the different colleges appointed annually by the Ministry. The degree of Doctor has no special privileges attached to it, other than that it admits the possessor to examination for official position.

AUSTRO-HUNGARIAN EMPIRE.—(Population about thirty-six millions.) There are six medical schools all supported by the government. To matriculate, the applicant must present a certificate from a gymnasium. The course of study extends over a period of at least five years, of about nine months in each year. Examinations are held at the end of the second year upon the various subjects of the first two years; and at the end of the fifth year upon the subjects of the preceding three years; two or three months after the latter examination the candidate must pass a third and final one, which secures the diploma of Doctor of Medicine, with the right to practise.

RUSSIA.—(Population over eighty-five millions.)—There are eight medical schools in Russia. To matriculate, the applicant must have a certificate from a gymnasium. The course of study extends over five years with examinations at the end of each year. The arrangement of the course of study is similar to that of Germany. Upon passing the final examination upon all the subjects of the entire course the candidate receives the right to practise with the title of "Physician." To obtain the degree of M. D., he must have the above title and must undergo a written examination, and also present a thesis. There was formerly a third degree, M. D., C. M., obtained after an examination in surgery, but it is now becoming obsolete.

SWEDEN.—(Population four and one half millions.)—There are two universities and one academy all of which confer the license to practise. To matriculate, the applicant must present a certificate from a gymnasium. Three years after matriculating the student is required to pass the medico-philosophical examination which includes physics, chemistry, mathematics, botany, zoology, and comparative anatomy. Three years later he must pass the examination for the academic degree of candidate in medicine which includes anatomy, physiology, physiological-chemistry, general pathology, pathological anatomy, and pharmacology. Four years later he must pass a final examination upon practical medicine and surgery, obstetrics, ophthalmology and medical jurisprudence. Upon passing the above examinations the candidate receives the right to practise. Attendance upon lectures is not obliga-

tory but the student is obliged to attend clinics for one and a half years. The course of medical studies is thus not less than ten years.

NORWAY.—(Population nearly two millions.)—The only medical school is in connection with the University of Christiana. To matriculate as a medical student the applicant must pass two preliminary examinations, one in arts, including Norwegian, Latin, Greek, French, German, English, mathematics, geography, and history, and one in philosophy, including geometry, zoology, botany, astronomy and the elements of chemistry and physics. He then enters upon the study of medicine proper, which on an average occupies six and three-quarter years. There are three examinations arranged as follows: 1st examination held two and a half years after matriculation, upon anatomy, dissection, use of the microscope, histology, chemistry (organic and inorganic), zoology, and botany. Second examination held three and a half years after the first upon physics, pharmacology, toxicology, medicine, therapeutics, general pathology, and pathological anatomy, surgery, ophthalmology, dermatology and syphilis. Third examination held about one year after the second, upon surgery and bandaging, topographical anatomy, obstetrics and gynaecology, diseases of children, forensic medicine, hygiene, and a practical examination in medicine and surgery. Thorough practical work in connection with the various hospital wards is also obligatory. Upon passing the examinations, which are conducted by the faculty, the candidate receives the right to practise. The doctorate is a scientific degree, giving the right to lecture at the university, and can be obtained only by passing a very severe examination.

DENMARK.—(Population nearly two millions.)—Has one medical school in connection with the University of Copenhagen. To matriculate, the candidate is required to present a certificate from a recognized literary institute, and must then attend a course of two years upon zoology, botany, physics and chemistry, including analysis. After passing the examination on these subjects, he is admitted to the course of medicine which extends over five years. The degree of M. D., with the right to practise after the final examination, is then conferred.

FRANCE.—(Population thirty-six millions.)—There are six academies conferring degrees and sixteen preparatory medical schools. To matriculate at an academy, the candidate must have the degree of B. A. and B. Sc. The course extends over four years of ten months in each year. In addition there are required practical laboratory work, and clinical work in connection with the hospitals, for two years. This may be done either the last two years of the course or the last year and the year following. There is a practical examination at the end of each of the three first years, and at the close the final examination for the Doctorate consists of five parts, including all the subjects of the course, together with the presentation of a thesis.

HOLLAND.—(Population one and a half millions.)—Has three universities supported entirely by the State. To matriculate at a university the applicant must present a certificate from a gymnasium or undergo an equivalent examination. The course extends over six years. The right to practise is not conveyed with this degree, but can be obtained only by passing an examination before a special board consisting of eight professors appointed annually by the government.

BELGIUM.—(Population over five millions.)—Has four universities two of which are supported by the State. To matriculate, the applicant must be a graduate of a literary college or pass a thorough preliminary examination. The course extends over five years and includes practical laboratory work, operative surgery, and attendance for three years upon clinics in medicine, surgery and obstetrics. The examination for the degree of Doctor of Medicine is held a few weeks after the close of the course, and includes the general subjects of the course, together with practical examinations in clinical medicine, surgery, obstetrics, and in operative surgery. This degree is conferred by the universities, but the diploma must be legalized by a Government Commission, whose duty it is to ascertain if all the conditions exacted by law have been complied with.

GREAT BRITAIN.—There are nineteen medical schools, ten, namely the universities, confer the Doctorate. The remainder bestow the various titles of licentiate, member and fellow. To matriculate, the applicant must either possess a degree in arts of some recognized collegiate institution, or must pass the prescribed preliminary examination. The course has been extended to five years. During the attendance at an hospital the student must serve as clinical dresser for three months, and as clinical clerk for three months. The examinations are two in number, partly written and partly oral. The examinations are quite rigid and are conducted by a board composed of professors and of others having no connection with the college. Upon passing the final examination the candidate receives the right to practise, with the title (differing in different schools) of licentiate, member, fellow, bachelor of medicine, bachelor of medicine and master of surgery, or doctor of medicine. In Edinburgh the degree of M.D. is only to be obtained after first having taken a degree both of bachelor of medicine and master of surgery, and after having devoted two years to actual practice. No special examination is required but the candidate must present a thesis. The higher titles such as F. R. C. S., F. R. C. P., and M. D., have no privileges attached to them outside of the college granting them, excepting that they are requisite for appointment on the staff of hospitals of any reputation. The medical profession in Great Britain enjoys that degree of estimation and credit which a science (conferring on mankind the greatest of all comforts) justly deserves. We find that the physicians and sur-

geons of Great Britain are almost invariably men of liberal education and cultivated minds and the art of medicine is carried to a singular height of excellence.

AUSTRALIA.—(Population about two millions.)—There are two universities, one at Melbourne and one at Sydney. Before matriculation the candidate must pass a rigorous examination in languages, mathematics, etc. The course of medical study extends over five years of nine months a year, and includes thorough practical work in laboratories and in hospital wards. The examinations are both written and oral. The final examination includes all the subjects of the fourth and fifth years with practical tests in dissection, operative surgery, clinical surgery, and medicine. Candidates are required to pass in all subjects. The degree of M. B. with license to practise is then given. To obtain the degree of M. D., which is a title merely conferring greater professional prestige, the applicant must have taken the degree of M.B. and subsequently have passed two years in hospital practice or five years in private practice, including in either case attendance for three months on the practice of an hospital for lunatics, and must also pass a special and elaborate examination both theoretical and practical in character.

ITALY.—(Population about twenty-nine millions.)—There are seventeen universities, four so-called free universities and one academy. To matriculate, the applicant must possess a certificate from a lyceum which is a high grade of literary institute. The course of medical study extends over six years of nine and one-half months in each year. There are three examinations held at intervals of two years by a commission composed of professors with one of two associates having no connection whatever with the schools and nominated by the government.

Excellence in one or more branches is not allowed to compensate for failure in others. Upon passing a second examination at the end of the fourth year the student receives the title of licentiate, which is merely an academic distinction. The final examination at the end of the sixth year includes not only all the subjects of the entire course of study, but also the diagnosis and treatment of medical, surgical and obstetric cases. Upon passing this examination and presenting a thesis, the candidate receives the degree of Doctor of Medicine and Surgery with the right to practise.

PORTUGAL.—(Population four millions.)—There are three medical schools all supported by the government. The course extends over five years of nine months each. To matriculate, the applicant must pass an examination in Latin, Portuguese, French, English, mathematics, elementary physics and chemistry, natural history, logic, history and geography.

BRAZIL.—(Population about twelve millions.)—There are two uni-

versities, requiring a rigid preliminary examination. The course extends over a period of six years. Upon passing the final examination, which embraces all the subjects of the course, and upon the presentation of a thesis, the candidate receives the degree of Doctor of Medicine, with the right to practise.

VENEZUELA.—(Population about two millions.)—There are two universities. To matriculate, the candidate must have the degree of bachelor of philosophy. The course extends over six years.

CHILI.—(Population two and a half millions.)—Has one medical school. The applicant must have a diploma of a collegiate institute to matriculate. The course extends over six years.

SPAIN.—(Population about seventeen millions.)—There are three medical schools. To matriculate, the candidate must have the degree of doctor of philosophy. The course of medical study is four years.

CUBA.—(Population was about one million.)—Has one university. To matriculate, the candidate requires to have a degree in arts. The course extends over six years.

UNITED STATES.—(Population about seventy millions.)—Has one hundred and six medical schools, with different regulations in each state. The leading States of Pennsylvania, New York, Massachusetts, and some others have State qualifications, so that a diploma serves only as a mark of literary distinction, and no longer gives the holder thereof the right to practise. Too many schools have lowered the standard in that country, but now the leading schools of the regular profession have a graded course of four years of nine months, and a preliminary examination.

CANADA.—Our beloved Canada, with a population of about five millions, has eleven medical schools. I need not refer to the collegiate course in this country. The colleges have been doing good work, and always followed in the wake of improvements. For years past the Canadian Medical Association has been endeavoring to educate the people as well as the profession on the necessity of having one qualification for all Canada. At the last meeting at Quebec, the basis of uniformity of curriculum was agreed upon, and the matter entrusted to Dr. Roddick to perfect and complete. We look to him as the Cæsar to lead us across the provincial Rubicon, and have established in Canada—what? the University of Canada, or the College of Physicians and Surgeons of Canada, or the Dominion Medical Council? Dr. Roddick has issued an address, in which he very ably set forth his views as follows:—

“By an Act of the Dominion Parliament, a corporation may be created called, let us say, The Dominion Medical Council, which would be composed of medical practitioners from each Province and from the North-West Territories. The principal function of this Council would

be to register all persons who have complied with certain requirements and all applicants who shall have complied would receive what might be termed Dominion registration by the Council."

As we are aiming at making the profession in Canada one body, with one legal qualification to practise, thus placing it as high as any other country, it behoves us to commence with a high standard of preliminary education. Men entering the profession with a low standard will be equally low in the estimation of the profession and of the public. They are the class who sell patent nostrums and show cleverness, not commercial but professional. Some of these are so clever that they do not require to see their patients. We have at least one on our register who pretends by the signs of the zodiac and the date of birth to tell the dispositions of his patients and in this way impress his great skill on the easily impressed minds of his patients. In the face of the bold and unblushing quackery which we witness there is great need of higher medical education as being truly in the interest of the common people, as they are the ones who will suffer most by ignorant pretenders in medical science.

The profession of medicine in Canada will be what its followers aim to make it. The duty of maintaining its sanctions, and its higher standard must devolve upon those who practise it. The Government of the country has done nothing for the cure of the diseased, although thousands and millions of dollars are expended on other objects. True they establish quarantine hospitals. Good government has for its object the happiness of its subjects, and while we find laws regulating education and morals, etc., it is a sad reflection on the wisdom of our legislatures that no endowment or appropriation is made for training men for curing diseases. Let every obstacle arising from ignorance of the human organism and the diseases to which it is subject be removed by a thorough medical education, and let no one be permitted to treat the human frame who is not well grounded in everything pertaining to its anatomy, physiology, and the nature and properties of the medicines for the cure of its diseases, in addition to a full knowledge of all the sciences bearing upon this wonderful organism. There is no profession which should embrace a wider domain of science. When we consider the jealous eye with which life and property is regarded in all civilized countries, and witness the precautions that are taken on steamships and railways, we wonder that any obstacles should be placed in our way by the very people we are trying to serve when we appear before them advocating higher medical education. To attain this object to-day the Federal Government must be approached. Whether we form the Dominion Medical Council or the University of Canada, the Federal Parliament should appropriate an annual sum to support and carry it through. The united

voice of the profession behind Dr. Roddick in Parliament will do much in this matter and help the consummation of our desires. In order to be worthy of the name of Canada it should be a State University or a State Council created and supported by the Federal Parliament. A diploma from such a body whether for a degree carrying with it the right to practise, or for membership, would be respected the world over. You could gain admission with it to the British Register, and the existence of such would serve as an object lesson to our cousins across the border.

Brethren, we must be united as one man, and it is a duty incumbent upon us to lay a good—a lasting foundation, and thus leave a legacy to our successors, which shall be as permanent as the everlasting hills. Like globules of quicksilver dispersed over a polished surface, so long as we have been separate we have been easily agitated and unquiet, but just as those globules, so soon as they come within the sphere of each other's attraction, however varying their size, are fused together into a common mass, so let us fuse and consolidate ourselves. On equal terms each and every province must unite to form a central organization which shall have the status and distinction of a legislature. The first principle dictated by political wisdom is this, that those fundamental rules be observed which natural justice inculcates as the proper groundwork of all social institutions. If these are violated or neglected, oppression will take place, and our members will become more and more dissatisfied. We live under a protectorate where the humblest and poorest subject may carry his complaints to Parliament; if once the united sense of our profession be decidedly formed and permanently expressed concerning the injustice or impolicy of any particular law, our voice will reach every branch of the Legislature, and obtain that change in the system which moral duty and the general welfare demand. It is thus that improvements have been made in the constitutions of nations for centuries past, and it is thus, we trust, they will continue to be made for centuries to come.

The approaching meeting of the Canadian Medical Association at Toronto is destined to be an important one. Every Council in the Dominion should be represented, as it is likely this meeting will be the last one at which the question will have to be considered. The tendency of the age is to have a five years' course, as it is in England, and for the completion of an arts course to be insisted upon as the requirement for matriculation.

The basis of agreement last year at Quebec required the B.A. degree or an academic first class teacher's licence, the latter being the same as an honour Diploma of the third year in the Prince of Wales College. Our Prince Edward's Island Legislature, pretending to be wiser than we, rejected that provision and substituted an ordinary teacher's licence

of the first class, a qualification deficient in Latin, Greek, English, French, geometry, algebra, statics, dynamics and practical chemistry. Very likely the whole question will have to be considered again and the Legislature will be asked to repeal the words "First Class Licence" in the P. E. Island Medical Act. College degrees can only be accepted as an acknowledgment of purely scientific attainments; they secure no professional rights to-day in any of the Provinces of Canada, and at the close of a university education a State examination is required in each Province. The practitioners of medicine in Canada should be free and legalized to practise their profession from the surging billows of the Atlantic to the placid waves of the Pacific, and as God's chosen, permitted to go forth to do battle with disease and death. Let our aim be to consolidate the profession under one head by Dominion Registration. In conclusion, I desire to say that so long as the foundation of our profession is science, and its end the good of mankind, let us not rest content until we place it on the highest plane with that of the foremost country and make it creditable alike to the profession and the people of Canada. If I have failed to add due interest to the theme, I can but ask that you will spread the mantle of your charity over my imperfections. Gentlemen, I thank you for your kind and courteous attention.

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